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6/23/03
U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL		<i>Attorney Docket No.</i>	199372005100
		<i>First Inventor</i>	Yasuhiro CHONO
		<i>Title</i>	SUBSTRATE PROCESSING SYSTEM AND SUBSTRATE PROCESSING METHOD
(Only for new nonprovisional applications under 37 CFR 1.53(b))		<i>Express Mail Label No.</i>	EV147810180US

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

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Date of Deposit: June 23, 2003

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Marco Jimenez

1753 U.S. PTO 06/23/03

06/23/03

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO:	Commissioner for Patents Mail Stop Patent Application P.O. Box 1450, Alexandria, VA 22313
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i> 3. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <i>[Total Sheets 11]</i> 5. Oath or Declaration <i>[Total Pages 3]</i> <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</i> 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies 	
ACCOMPANYING APPLICATION PARTS			
9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(where there is an assignee)</i> <input type="checkbox"/> Power of Attorney By Assignee 11. <input type="checkbox"/> English Translation document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citation(s): 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>Should be specifically itemized</i> 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other _____			

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No: _____

Prior application information:

Examiner *

Group / Art Unit: *

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	 * 2 5 2 2 4 *		or <input type="checkbox"/> Correspondence address below
(Insert Customer No. or Attach bar code label here)			

Name	David L. Fehman		
	Morrison & Foerster		
Address	555 W. 5th Street, 35th Floor		
City	Los Angeles	State	CA
Country	US	Telephone	(213) 892-5601
Name (Print/Type)	David T. Yang	Registration No. (Attorney/Agent)	44,415
Signature	 Date June 23, 2003		

||
la-663972

FEE TRANSMITTAL FOR FY 2003

Patent fees are subject to annual revision.

 Applicant Claims Small Entity Status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$1096.00)

Complete if Known

Application Number	Not yet assigned
Filing Date	Concurrently herewith
First Named Inventor	Yasuhiro CHONO
Examiner Name	Not yet assigned
Group Art Unit	Not yet assigned
Attorney Docket No.	199372005100

METHOD OF PAYMENT

FEE CALCULATION (continued)

 Check Credit Card Money Order Other

Deposit Account Number

03-1952

Deposit Account Name

Morrison & Foerster LLP

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) required Under 37 CFR 1.16 and 1.17
 Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee (\$)	Fee (\$)
1001	750	2001	375
1002	330	2002	160
1003	520	2003	260
1004	750	2004	375
1005	160	2005	80
SUBTOTAL (1)		(\$750.00)	

2. EXTRA CLAIM FEES

Total Claims	- 20* =	Extra Claims	Fee from below	Fee Paid
Independent Claims	6 - 3 =	3	x 84	= \$252
Multiple Dependent				= \$
Large Entity	Small Entity	Fee Description		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claims, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$306.00)		

** or number previously paid, if greater; For Reissues, see above.

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	410	2252	205
1253	930	2253	465
1254	1,450	2254	725
1255	1,970	2255	985
1401	320	2401	160
1402	320	2402	160
1403	280	2403	140
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,300	2453	650
1501	1,300	2501	650
1502	470	2502	235
1503	630	2503	315
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	750	2809	375
1810	750	2810	375
1801	750	2801	375
1802	900	1802	900
Other fee (specify)			
SUBTOTAL (2)		(\$306.00)	

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$40.00)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	David T. Yang	Registration No. (Attorney/Agent)	.44,415	Telephone	(213) 892-5587
Signature				Date	June 23, 2003

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